

# FEC FORM 5

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation <b>IOWA CITIZENS FOR COMMUNITY IMPROVEMENT ACTION FUND</b>		3. FEC Identification Number <b>C</b> C90013897
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 2001 FOREST AVENUE		
(c) City, State and ZIP Code DES MOINES IA 50311		
2. Occupation and Name of Employer (for Individual Filers Only)		

4. TYPE OF REPORT (check appropriate boxes):

- (a) ☐ April 15 Quarterly Report  
☐ July 15 Quarterly Report ☒ 24-Hour Report  
☐ October 15 Quarterly Report ☐ 48-Hour Report  
☐ January 31 Year-End Report

b) Is this Report an amendment? ☒ No ☐ Yes, it amends the report filed on

/  /

5. COVERING PERIOD:

FROM  /  /   
THROUGH  /  /

6. TOTAL CONTRIBUTIONS..... .00

7. TOTAL INDEPENDENT EXPENDITURES .....  1838.23

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

Matthew Covington

SIGNATURE

Matthew Covington

DATE

[Electronically Filed]

05/04/2016

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 2 OF 2  
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

IOWA CITIZENS FOR COMMUNITY IMPROVEMENT ACTION FUND

Full Name (Last, First, Middle Initial) of Payee Carter Printing		Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 21 / 2016	
Mailing Address 1739 E Grand Ave		Amount 1548.87	
City Des Moines	State IA	Zip Code 50316	Transaction ID : F57.000001
Purpose of Expenditure printing and mailing services for voter communication	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1548.87		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Edwards United Church of Christ		Date of Public Distribution/Dissemination MM / DD / YYYY 01 / 21 / 2016	
Mailing Address 3420 Jersey Ridge Rd		Amount 90.00	
City Davenport	State IA	Zip Code 52807	Transaction ID : F57.000002
Purpose of Expenditure room rental for voter contact activities	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1638.87		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Holiday Inn Express		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 03 / 2016	
Mailing Address 1140 24th St		Amount 199.36	
City Des Moines	State IA	Zip Code 50311	Transaction ID : F57.000003
Purpose of Expenditure lodging for voter engagement canvasser	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Bernard Sanders		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1838.23		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1838.23
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	1838.23